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**State of Vermont**  
**Vermont Department of Education**  
120 State Street  
Montpelier, VT 05620-2501

**MEMORANDUM**

**TO:** Recognized School Contacts

**FROM:** Pat Pallas Gray, Independent School Consultant

**DATE:** May 4, 2009

**RE:** **Recognized Independent School Application Forms for 2009-2010**

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Enclosed is the information required annually to continue your school's recognized independent school status. This information must be received by the Department of Education prior to the public schools in your area opening for the 2009-2010 school year. It is recommended that you submit the completed forms in June or July. This will give the Independent School Office an opportunity to respond to your notice in a timely manner.

These forms are also available at the Department of Education Web site on the independent schools page at [http://education.vermont.gov/new/html/pgm\\_independent.html](http://education.vermont.gov/new/html/pgm_independent.html) in Word format. The application can be completed using your word processing program. At this time it is not possible to submit the forms via email. You must print the forms, sign them where required and mail them to the Department of Education.

Recognized schools that have been granted recognition status from the Christian Schools of Vermont (CSV), only need to complete and submit the first page of the Recognized Independent School Cover Sheet, the signed statement of policies and procedures assurances page, and provide a copy of their 2009-2010 school year calendar.

You will not find a student census form in this packet. The student census information will be gathered in the fall by the data unit at the Department of Education. You will be contacted individually for this information by the data unit at the department.

If you have any questions, please feel free to contact Pat at (802) 828-5414.

## **Recognized Independent School Enrollment Notice**

Recognized independent schools submit a yearly enrollment notice to the Commissioner of Education. The schools must file the enrollment notice forms provided by the Commissioner no earlier than three months before the beginning of the school year for the public schools in the town in which the school proposes to locate.

There are eight sections required to complete the recognized school enrollment notice. These sections are:

- 1. Cover Sheet**
- 2. Statement of Objectives**
- 3. Statement of the Minimum Course of Study**
- 4. Statement of the Assessment Procedures**
- 5. Signed Statement of Assurances--**Some of the assurances refer to those sections of 16 V.S.A. §166 that must be carried out by the school. Others refer to those health, safety and physical facility requirements of the regional department officials. See pages 41-56 of the Independent School Guidelines [http://education.vermont.gov/new/html/pgm\\_independent.html](http://education.vermont.gov/new/html/pgm_independent.html) for information on these requirements.
- 6. Signed Statement of Policies and Procedures**
- 7. Your School's Academic Calendar**
- 8. The Oath, signed and notarized**

When the forms are completed and appropriately signed and notarized, please mail your completed packet to:

Pat Pallas Gray  
Independent School Unit  
Vermont Department of Education  
120 State Street  
Montpelier, Vermont 05620-2501

These forms can also be found at [http://education.vermont.gov/new/html/pgm\\_independent.html](http://education.vermont.gov/new/html/pgm_independent.html) in a format that allows you to complete the forms using your word processing program.

If you have questions please call or email Pat Pallas Gray at (802) 828-5414 or [pat.pallasgray@state.vt.us](mailto:pat.pallasgray@state.vt.us)

**Recognized Independent School Cover Sheet**  
**20\_\_ -20\_\_ School Year**

Name of School: \_\_\_\_\_

Name of Chief Education Officer  
or Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Grades: \_\_\_\_\_

(If you use an alternative to a graded system please describe below or on separate sheet(s) if necessary.)

Name of Local  
Supervisory Union: \_\_\_\_\_

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**Statement of Hours and Days**

Education activities regularly begin at \_\_\_\_\_ and regularly end at \_\_\_\_\_.

Total school days: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

[illegible]

[illegible]

[illegible]

**Recognized Independent School  
Statement of Assurances**

In making this report to the Commissioner, the school makes the following assurances:

- A) The school will prepare and maintain attendance records for each pupil enrolled or regularly attending classes;
- B) At least once each year the school will assess each pupil's progress and will maintain records of that assessment, and present the results of that assessment to each student's parent or guardian;
- C) The school will have teachers and materials sufficient to provide the minimum course of study;
- D) The school's educational program will include the minimum course of study set forth in section 906 of this title; and
- E) The school will meet such state and federal laws and regulations concerning its physical facilities and health and safety matters as are applicable to recognized independent schools.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Recognized Independent School  
Statement of Policies and Procedures**

In signing this statement of policies and procedures, the school is verifying to the Commissioner that it has adopted harassment and hazing prevention policies and established procedures for dealing with harassment and hazing of students, pursuant to 16 V.S.A. §166(e).

Your signature on this form verifies that your school has policies in place that are at least as stringent as the Department of Education's model policies.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Title:** \_\_\_\_\_



# Independent School Calendar

School Year 20\_\_ - 20\_\_

School: \_\_\_\_\_ Grades: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*Please Write In The Dates School Is Scheduled To Be In Session*

September 20\_\_

M T W T F

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OCTOBER 20\_\_

M T W T F

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NOVEMBER 20\_\_

M T W T F

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\_\_\_\_\_

DECEMBER 20\_\_

M T W T F

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\_\_\_\_\_  
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JANUARY 20\_\_

M T W T F

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FEBRUARY 20\_\_

M T W T F

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MARCH 20\_\_

M T W T F

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APRIL 20\_\_

M T W T F

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MAY 20\_\_

M T W T F

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JUNE 20\_\_

M T W T F

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JULY 20\_\_

M T W T F

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\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_

AUGUST 20\_\_

M T W T F

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The total school days scheduled is: \_\_\_\_\_.



**State of Vermont**  
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120 State Street  
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**This form must be  
notarized.**

### **Oath**

- ☐ I do solemnly swear (or affirm) that I will support the Constitution of the United States and the State of Vermont and the Laws of the United States and of the State of Vermont.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

- ☐ I am a citizen of a foreign country. Under Title 16 § 12, I am not required to sign this Oath.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**To be valid this box must be completed by a notary public.**

Subscribed and sworn or affirmed before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

**Your recognized school enrollment form will not be considered until the school's administrator and each of the school's instructional staff completes this oath. The notarized oath needs to be submitted to the Independent School Office with the other recognized independent school enrollment notice forms.**